Approved for use through 7/31/2005, CMB 0651-0032 U.S. Palent and Tradement Office: U.S. DEPARTMENT OF COMMERCE Under the Paperson Reduction Act of 1995, no persons are required to respond to a collection of information unless II displays a valid CMB control number. Application or Doctory PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 Substitute for Form PTO-875. OTHER THAN APPLICATION AS FILED - PART I SMÁLL ENTITY OR SMALL ENTITY (Catumn 2) (Column 1). NUMBER FILEO NUMBER EXTRA RATE (S) FEE GI RATE (\$) FEE (1) FOR 150.00 300.00 BASIC FEE NJA N/A 84/A N/A (3) CFR 1 18(4) (6) 0 (6)) \$500 SEARCH FEE \$250. N/A N/A N/A NIA (D) CFR 1 16(U. (4. or (m) EXAMINATION FEE \$200 \$100 NIA NU N/A NA (37 CFR-1 10(d. tr). or fu)) TOTAL CLAIMS X\$50 X\$ 25 **C**A minia 20 s CD.CFR 116(d) INDEPENDENT CLAUMS X200 X100 mmes 3 (37 CFR 1 16(N) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each 07 CFR 1 16(1)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **+360=** +180= MULTIPLE DEPENDENT CLAIM PRESENT (07 CFR 1 16(1) TOTAL . off the difference in column 1 is less than zero, enter "O" in column 2. TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY (Column 2) (Column 3): SMALL ENTITY (Column 1) HIGHEST CLAIMS NUMBER PRESENT RATE (S) ADDI-RATE (\$) ADD: REMAINING TIONAL TIONAL FXTRA PREVIOUSLY AFTER FEE (\$) FEE (1) PAID FOR ENDMENT AMENDMENT Minus Total X\$ 25 X\$50 OR CO CIR LIE Minus X200 X100 OR Application Size Fee (37 CFR 1.16(6)) +360= 4180= ٠. PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DT CFR 1.180) TOTAL OR ADO'L FEE ADO'L FEE (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS PRESENT RATE (1) RATE (\$) ADOI-ADDI. NUMBER REMAINING TIONAL TIONAL 10 **EXTRA** AFTER. PREVIOUSLY PEE (5) FEE (5) MENOMENT PAID FOR 20 Minus Total or ora Luca 20 X\$ 25 . X\$50 OR Minus Ц X100 X200 OF CHE LIEPE OR Application Size Fee (37 CFR 1.16(s)) **+360**± +180a FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (ST OFR 1.16(6)) CR TOTAL TOTAL OR ADD'L FEE ADO'L FEE If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the Tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the Tighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The Tighest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to like (and by the PTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. beding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Intermation Officer, U.S. Peterd I Trademark Office, U.S. Department of Commence, P.O. Box 1450, Abazandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.